



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)



CONFIRMATION NO. 9177

Bib Data Sheet

|                             |  |              |                        |   |
|-----------------------------|--|--------------|------------------------|---|
| SERIAL NUMBER<br>10/552,875 | FILING OR 371(c)<br>DATE<br>10/13/2005<br>RULE | CLASS<br>403 | GROUP ART UNIT<br>3679 | ATTORNEY<br>DOCKET NO.<br>20410/0203396-US0 |
|-----------------------------|--|--------------|------------------------|---|

**APPLICANTS**

Niki S. Woodhead, Bristol, UNITED KINGDOM;  
 Andrew R. Slayne, Bristol, UNITED KINGDOM;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/GB04/01681 04/16/2004

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

UNITED KINGDOM 0308957.0 04/17/2003

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 06/21/2006

|  |                                    |                        |                    |                         |
|--|------------------------------------|------------------------|--------------------|-------------------------|
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no   | STATE OR COUNTRY<br>UNITED KINGDOM | SHEETS<br>DRAWING<br>3 | TOTAL CLAIMS<br>12 | INDEPENDENT CLAIMS<br>1 |
| 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verifier and<br>Acknowledged<br><br>Examiner's Signature<br>Initials |                                    |                        |                    |                         |

**ADDRESS**

7278

**TITLE**

Tolerance ring assembly

|                            |   |   |
|----------------------------|---|---|
| FILING FEE RECEIVED<br>900 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|----------------------------|---|---|